COMBINATION APPLICATION: FLOODPLAIN, CONSTRUCTION AND HARC

\$50.00 APPLICATION FEE NON-REFUNDABLE



City of Key West

1300 WHITE STREET KEY WEST, FLORIDA 33040

Phone: 305.809.3956

BLDG@CITYOFKEYWEST-FL.GOV

HARC PERMIT NUMBER		BUILDING PERMIT NUMBERINITIAL & DATE			
FLOODPLAIN PERMIT		ZONING		REVISIO	N #
FLOOD ZONE	PANEL#	ELEV. L. FL.	SUBSTANTIAL	IMPROVEME	NT
			YES _	NO	%

ADDRESS OF PROPOSED PROJECT:			# OF UNITS			
RE # OR ALTERNATE KEY:						
NAME ON DEED:			PHONE NUMBER			
OWNER'S MAILING ADDRESS:	NER'S MAILING ADDRESS:		EMAIL			
CONTRACTOR COMPANY NAME:			PHONE NUMBER			
CONTRACTOR'S CONTACT PERSON:			EMAIL			
ARCHITECT / ENGINEER'S NAME:			PHONE NUMBER			
ARCHITECT / ENGINEER'S ADDRESS:			EMAIL			
HARC: PROJECT LOCATED IN HISTORIC	DISTRICT OR IS CONTRIB	UTING:YESNO (S	SEE PART C FOR HARC APPLICATION.)			
CONTRACT PRICE FOR PROJECT OR ES	TIMATED TOTAL FOR MAT	'L., LABOR & PROFIT:	\$			
FLORIDA STATUTE 837.06: WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING AND WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE PUNISHABLE PER SECTION 775.082 OR 775.083.						
DETAILED Project Description(The applicant further hereby acknowledges that the scope of work as decribed shall be the scope of work that is considered by the City. Should further action be taken by the City for exceeding the scope of the decription of work as described herein versus the scope of work shown on the plans or other documents submitted with the application, the aforementioned decription of work shall be controlling.)						
Printed name of property owner or licensed contractor.		Signature.				
Notary Signature as to applicant. State of Florida, County of Monroe, Sworn to and subscribed before me.						
Personally known or produced	as identification.					

PART B: SUPPLEMENTARY PROJECT DETAILS TO AVOID DELAYS / CALL-BACKS

PROPERTY STRUCTURES AFFECTED BY PROJECT: MAIN STRUCTURE ACCESSORY STRUCTURE SITE						
ACCESSORY STRUCTURES: GARAGE / CARPORT DECKFENCE OUTBUILDING / SHED						
FENCE STRUCTURES: 4 FT 6 FT. SOLID 6 FT. / TOP 2 FT. 50% OPEN						
POOLS: INGROUND ABOVE GROUND SPA / HOT TUB PRIVATE PUBLIC						
PUBLIC POOLS REQUIRE BD. OF HEALTH LICENSE APPLICATION AT TIME OF CITY APPLICATION.						
PUBLIC POOLS REQUIRE BD. OF HEALTH LICENSE PRIOR TO RECEIVING THE CITY CERTIFICATE OF OCCUPANCY.						
ROOFING: NEW ROOF-OVER TEAR-OFF REPAIR AWNING						
5 V METAL ASPLT. SHGLS METAL SHGLS BLT. UP TPO OTHER						
FLORIDA ACCESSIBILITY CODE: 20% OF PROJECT FUNDS INVESTED IN ACCESSIBILITY FEATURES.						
SIGNAGE: # OF SINGLE FACE # OF DOUBLE FACE REPLACE SKIN ONLY BOULEVARD ZONE						
POLEWALL PROJECTING AWNING HANGING WINDOW						
SQ. FT. OF EACH SIGN FACE:						
SUBCONTRACTORS / SPECIALTY CONTRACTORS SUPPLEMENTARY INFORMATION:						
MECHANICAL: DUCTWORKCOMMERCIAL EXH. HOOD INTAKE / EXH. FANS LPG TANKS						
A / C: COMPLETE SYSTEM AIR HANDLER CONDENSER MINI-SPLIT						
ELECTRICAL: LIGHTING RECEPTACLES HOOK-UP EQUIPMENT LOW VOLTAGE						
SERVICE:OVERHEADUNDERGROUND1 PHASE3 PHASEAMPS						
PLUMBING: ONE SEWER LATERAL PER BLDG INGROUND GREASE INTCPTRS LPG TANKS						
RESTROOMS: MEN'S WOMEN'S UNISEX ACCESSIBLE						
PART C: HARC APPLICATION FOR A CERTIFICATE OF APPROPRIATENESS						
APPLICATION FEES: PAINTING SINGLE FAMILY: \$10 STAFF APPROVAL: \$50 COMMISSION REVIEW \$100						
PLEASE ATTACH APPROPRIATE VARIANCES / RESOLUTIONS FROM HARC, PLANNING BOARD OR TREE COMMISSION.						
ATTENTION: NO BUILDING PERMITS WILL BE ISSUED PRIOR TO HARC APPROVAL.						
PLEASE SEND ELECTRONIC SUBMISSIONS TO: harc@cityofkeywest-fl.gov						
INDICATE TYPE OF CERTIFICATE. OF APPROPRIATENESS:GENERALDEMOLITIONSIGNPAINTINGOTHER						
ADDITIONAL INFORMATION:						
PROJECT SPECIFICATIONS: PLEASE PROVIDE PHOTOS OF EXISTING CONDITIONS, PLANS, PRODUCT SAMPLES, TECHNICAL DATA						
ARCHITECTURAL FEATURES TO BE ALTERED: ORIGINAL MATERIAL: PROPOSED MATERIAL:						
DEMOLITION: PLEASE FILL OUT THE HARC APPENDIX FOR PROPOSED DEMOLITION.						
DEMOLITION OF HISTORIC STRUCTURES IS NOT ENCOURAGED BY THE HISTORIC ARCHITECTURAL REVIEW COMMISSION.						
SIGNAGE: (SEE PART B) BUSINESS SIGN BRAND SIGN OTHER:						
BUSINESS LICENSE # IF FAÇADE MOUNTED, SQ. FT. OF FAÇADE						

	SIGN SPECIFICATIONS	
SIGN COPY:	PROPOSED MATERIALS:	SIGNS WITH ILLUMINATION:
		TYPE OF LTG.:
_		LTG. LINEAL FTG.:
MAX. HGT. OF FONTS:		COLOR AND TOTAL LUMENS:
IF USING LIGHT FIXTURES PLEASE INDICATE HO	W MANY: INCLUDE SPEC. SHEET WITH LOCA	ATIONS AND COLORS.
OFFICIAL USE ONLY:	HARC STAFF OR COMMISSION REVIEW	
APPROVED NOT APPROVED	DEFERRED FOR FUTURE CONSIDERA	TION TABLED FOR ADD'L. INFO.
HARC MEETING DATE:	HARC MEETING DATE:	HARC MEETING DATE:
REASONS OR CONDITIONS:		
STAFF REVIEW COMMENTS:		
HARC PLANNER SIGNATURE AND DATE:	HARC CHAIRPERSON S	SIGNATURE AND DATE:

PART D: STATE OF FLORIDA OFFICIAL NOTIFICATIONS AND WARNINGS

FLORIDA STATUTE 713.135: WARNING TO OWNER: YOUR FAILURE TO RECORD A 'NOTICE OF COMMENCEMENT' MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED WITH THE COUNTY RECORDER AND A COPY POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING A NOTICE.

FLORIDA STATUTE 469: ABESTOS ABATEMENT. AS OWNER / CONTRACTOR / AGENT OF RECORD FOR THE CONSTRUCTION APPLIED FOR IN THIS APPLICATION, I AGREE THAT I WILL COMPLY WITH THE PROVISIONS F. S. 469.003 AND TO NOTIFY THE FLORIDA D. E. P. OF MY INTENT TO DEMOLISH / REMOVE ASBESTOS.

IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT APPLICATION, THERE MAY BE DEED RESTRICTIONS AND / OR ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF MONROE COUNTY AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENT ENTITIES SUCH AS AQUADUCT ATHORITY, FLORIDA DEP OR OTHER STATE AGENCIES; ARMY CORPS OF ENGINEERS OR OTHER FEDERAL AGENCIES.

FEDERAL LAW REQUIRES LEAD PAINT ABATEMENT PER THE STANDARDS OF THE USDEP ON STRUCTURES BUILT PRIOR TO 1978.

ALL NECESSARY APPROVALS FROM ASSOCIATIONS, GOV'T. AGENCIES, AND OTHER PARTIES ARE THE APPLICANT'S RESPONSIBILITY.